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BOSTON UNIVERSITY
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II. A STUDY OF THE COMMUNITY ADJUSTMENTS OF TWENTY-TWO
ADOLESCENTS WHO WERE DISCHARGED FROM THE RHODE ISLAND
CHILDREN'S CENTER DURING JULY 1, 1946-JULY 1, 1948.

A Thesis

Submitted by

Martin Spencer Orzeck

(A.B., Providence College, Providence, Rhode Island, 1941)

In Partial Fulfillment of Requirements for
the Degree of Master of Science in Social Service

1949

BOSTON UNIVERSITY
SCHOOL OF SOCIAL WORK

A STUDY OF THE COMMUNITY ADJUSTMENT OF TWENTY-TWO
ADOLESCENTS WHO WERE DISCHARGED FROM THE RHODE ISLAND
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School of Social Work
June 17, 1949
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A Thesis

Submitted by

Barbara Spencer Orsick

(A.B., Providence College, Providence, Rhode Island, 1941)

In partial fulfillment of requirements for
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CHAPTER I

INTRODUCTION

General Purposes

This is a study of the community adjustments of twenty-two adolescent children who were discharged from the Dr. Patrick I. O'Rourke Children's Center, the study home of the R. I. Children's Division. The writer endeavored to find the answers to the following general questions: What were the telling factors that influenced the adolescents' community living? It was the writer's interest to find out where the adolescents were and how they were adjusting to community life after living deprived lives, after living in foster homes, in institutions, and after suffering the traumas of neglect, rejection, and dependency upon private child care agencies and the R. I. Children's Division. What factors existed previous to commitment to the Children's Division and previous to admittance to the Children's Center? What factors manifested themselves at the Children's Center? The writer also sought to inquire into the preparation of children in the institution for life outside.

With regard to casework considerations the writer attempted to make note of how the social worker helped the children both in the institution and in the community following discharge from the Center. The writer also hoped to find indications of casework with parents and families for the

assistance and support of the children. There is the possibility that some suggestions for future casework with adolescents in the Children's Center might be indicated.

It was also planned to consider other services which were instrumental in helping the adolescents, such as psychiatric consultation, the school guidance department, employment agencies, group work agencies, and any other community resource.

Scope

It was planned to study those adolescents who left the institution at about the age of sixteen. The Children's Center has no provision for caring for children above that age, especially since it is the legal age to leave school and obtain employment. The age is flexible, including some children over sixteen at the time of discharge from the Center and those who would soon be sixteen after discharge from the Center. Although the writer originally selected all the cases between two fiscal years July 1, 1946 and July 1, 1948, children who left the Center during the summer weeks after July 1, 1948 were not excluded, since they would soon be sixteen and planned to leave school. They numbered five. The writer therefore inquired into the various ways these adolescents adjusted in their own homes, in homes of relatives, in boarding homes, at work, school, and in any other community influence.

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Methods

The writer selected all the adolescents who left the R. I. Children's Center at about the age of sixteen during the years July 1, 1946 and July 1, 1948. Initially the writer examined the statistical cards of the Children's Division. Active and inactive files were used. The writer compared the list of cases selected with that of the discharge lists of the Children's Center, since the Center, as a part of the Division, kept its own statistics of admissions and discharges. In all twenty-two cases were found, since as has been stated, the selection as to age and time of discharge was flexible.

The writer studied the case records of the children and their families and extracted meaningful material with the use of the schedule. In some instances the writer has spoken with the caseworker who now handles the case or who once handled the case, if it is now closed and out of care. In a few instances the adolescent was seen, and in one case a personnel manager supplied some up-to-date information about the adolescent's work progress. Where lack of recording leaves gaps, the writer has attempted to fill in these gaps with information from the case workers themselves to whom the writer is grateful.

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CHAPTER II

THE R. I. CHILDREN'S DIVISION AND

THE CHILDREN'S CENTER

Laws and Policies:

It is the object of this chapter to describe the R. I. State laws and policies which govern the R. I. Children's Division and the Children's Center. Since July, 1948, by a decree of the General Assembly, The State Home and School, known by that name since its inception in 1885, was changed to the Dr. Patrick I. O'Rourke Children's Center. In 1882 a committee endeavoring to establish an institution for dependent and neglected children under the custody of the state recommended:

The establishment of an institution which shall be both a school and a home, entirely separate from all association with any places of a penal or pauper character, to which no stigma of arrest, conviction, sentence or previous misconduct shall be attached and where under favorable circumstances the attempt shall be made to educate such children into a virtuous, self-respecting and self-supporting manhood and womanhood.¹

Therein is stated the source for the original name and the purpose of the Children's Center. The purpose was written into the law in 1885 and re-stated in the many changes of the law.

¹ Henry J. Crepeau, R. I.: A History of Child Welfare Planning, A Dissertation, Catholic University, School of Social Work, 1941.

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The control and maintenance of the State Home and School for dependent and neglected children shall be vested in the bureau of children's care, of the division of social security, within the department of public welfare. Said school shall be known as the State Home & School. The said bureau shall establish a system of government for the institution, and shall make all necessary rules and regulations for imparting instruction, and for the proper training of the children.²

The law indicated that the responsibility for the control and maintenance of the institution shall be vested in the bureau of children's care since it was formerly the responsibility of the Department of Education as stated in the law of 1885. The said "bureau" was later changed to "children's services", and is now known as the "Children's Division" which title the writer will refer to.

The following laws clarify the general purposes of the Children's Division and the Children's Center:

Said bureau shall receive, in accordance with the rules by it established, such children as may be declared vagrant, truant, neglected or dependent on the public for support, as provided in this chapter, who are under eighteen years of age, and who are in a suitable condition of mind to be instructed, and may release or discharge any such child from its care and custody to the child's relatives or others whenever the deputy chief of the bureau is satisfied that the object of the commitment has been accomplished and conditions appertaining to such child are deemed to justify such release or discharge.³

It is declared to be the object of this chapter to provide for neglected and dependent children, not recog-

² General Laws of R. I., 1923, Ch. 114; Pub. laws, 1917, Ch. 1470, Sec. 1.

³ Ibid., Sec. 2.

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nized as vicious or criminal, such influences as will lead toward an honest, intelligent, self-supporting manhood and womanhood, the state, so far as possible, holding to them the parental relation. But if at any time, in the discretion of the director of public welfare, this object can be better attained by placing a child in a good family of the same religious belief as the parents of such child, said director of public welfare shall have the power to do so on condition that its education shall be provided for by such family in the public schools of the town or city where they may reside, or in some other suitable public school or private school; and whenever such a course is desirable or necessary said department of public welfare may pay such amount as may be agreed upon for the care and support of such child. The director may in his discretion place any child requiring special treatment, training or oversight, in any institution controlled by persons of the same religious belief as the parents of such child, providing such special treatment, training or oversight, and may pay such amount as may be agreed upon, for the care and support of such child.⁴

It should be stated that all children committed to the R. I. Children's Division are committed by the R. I. Juvenile Court. The commitment orders are diverse: custody is given to the Children's Division either until age eighteen for boys, twenty-one for girls, or until further order of the court as provided in Section two of the General Laws. Accordingly, most of the children in this study are still under care of the Children's Division although they had been discharged from the Children's Center.

In Section three of the General Laws it will be noticed that provision is made for the foster-home program and the

⁴ Ibid., Sec. 3.

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In Section three of the General Laws it will be noticed that provision is made for the foster-home program and the

use of other institutions wherever necessary.

In order to describe the Children's Center about the time the children under study were in the Center, the following quotations may be helpful:

Institutional and Group Care is provided children at the State Home and School. This has become primarily a reception and study institution where the needs of children are evaluated pending the re-establishment of their own home or their placement in a foster home. Special corrective work, group training and treatment are offered on a cottage plan.⁵

In line with the changing policy utilizing the State Home and School for increased service to all children under the care of the Children's Division, it has increasingly been used as a service center for study, treatment, and care of those children who could best benefit from living in the group, both new children and those already under foster care.

In line with modern trends in child care, the institution is the center through which understanding and training of individual children is effected through group methods. This is accomplished through individual case work skills, staff planning, observation, and securing participation of the child in the group program of the institution.

The program aims to prepare the child in the shortest possible time to return to his own home, a home of relatives, or a foster home. Foster home care is provided by the child-placing unit of the Children's Division. Each type of care has certain values to offer children which the other can not offer.⁶

The well-rounded curriculum of services is stated:

5 Thirteenth Annual Report, 1946-47, R. I. Department of Social Welfare, Children's Division, p. 16.

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It is being utilized (in spite of its limitations) for study of all Children's Division children, social, medical, psychological, and psychiatric (where indicated) so that adequate plans for their future may be instituted as early as possible.

Frequent consultations are arranged with cottage parents and weekly treatment staff meetings held with the result that there is a progressive program in each cottage.⁷

This idea is similar to that of Schumacher:

Here, in one definitely organized setting, all of the modern skills in the handling and treatment of children can be marshaled, including trained leadership through cottage personnel and other supervisors, plus the specific skills of the teacher, social worker, recreation leader, psychiatrist, psychologist, nurse, pediatrician, religious educator, executive and vocational advisor.⁸

From the above quotations one is able to discern the growth and change in thinking and planning for children under State Care. Although the Center has now, as well as in the past, a group of defective, nearly defective and disturbed children who will most likely not be able to make adequate community adjustments, the purpose persists to care for children able to be trained, educated, and prepared for community living.

The writer has tried to keep this limitation in mind while evaluating the adolescents' progress. It seems imperative to state the concept that the staff of the insti-

⁷ Ibid., p. 23.

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tution and the case work staff are able only to work with the children and the families as the families are able to realize their capacities for parenthood; and the children are able to realize their relationships to their families in rightful-realistic perspective.

Alcorno¹, in the application of psychoanalytic principles to the treatment of delinquent adolescents, contributes much to the understanding and guidance of adolescents. Although Alcorno dealt with delinquent children manifesting neurotic symptoms, neglect and dependency result in various degrees of emotional instability due probably to the loss of love of their parents, especially during the early years preceding the onset of puberty. Instability may also be due to the death of one or both parents, marital strife in the home, divorce, illness of one or both parents, the presence of alcoholic or psychotic parents, - all resulting in separation and neglect of children who appear before the Juvenile Court.

It would seem that some kinds of children are able to profit by group living and others are not. What kinds of children, first, are able to profit by institutional life?

¹ August Alcorno, *Harvard Youth* (New York: Viking Press, 1935).

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CHAPTER III

REVIEW OF LITERATURE

Adolescents and Group Living

This chapter will review the literature with regard to children in institutions, the preparation of children for community living, the psychology of adolescence, and some trends in case work treatment of adolescence.

Aichhorn¹, in the application of psychoanalytic principles to the treatment of delinquent adolescents, contributes much to the understanding and guidance of adolescents. Although Aichhorn dealt with delinquent children manifesting neurotic symptoms, neglect and dependency result in various degrees of emotional instability due probably to the loss of love of their parents, especially during the early years preceding the onset of puberty. Instability may also be due to the death of one or both parents, marital strife in the home, divorce, illness of one or both parents, the presence of neurotic or psychotic parents, - all resulting in dependent and neglected children who appear before the Juvenile Court.

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Suzanne Schulze delineates the following:

1. Children with a strong family tie who cannot accept substitute parents.
2. Children of separated parents used as a pawn by them for their own needs - one or both may have remarried.
3. Children of certain inadequate parents who because of their attitudes toward failure as parents, seem to prevent another family's success with their children.
4. Children unable to form close relations with adults as required in foster homes.
5. Children who failed a number of times in foster homes and need less personal environment.
6. Children who need close and continual observation to determine their needs.
7. Children over six years who need regular habit training. (usually adolescents)
8. Children who need protection from unstable parents.²

The Children's Center at present serves the following types of children:

1. Children dependent or neglected who need long time group care.
2. Children who are not ready for foster home placement because of social, physical, or emotional problems.
3. Children who have been living in foster homes but have failed to adjust.³

In the past such distinctions were not made, so that all kinds of children were sent to institutions regardless of their needs as individuals and "little work was done to prepare them for community living."⁴ It is asked "how long

² Suzanne Schulze, "Group Living and the Dependent Child," Proceedings of the National Conference of Social Work, 1946.

³ Thirteenth Annual Report, 1946-47, R. I. Department of Social Welfare, p. 16.

⁴ Justine Wise Polier, Everyone's Children, Nobody's Child (New York: Scribner, 1941), pp. 27-28.

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3 Thirteenth Annual Report, 1948-49, R. I. Department of Social Welfare, p. 12.

4 Justice Wise Poller, Everyone's Children, Nobody's Child (New York: Scribner, 1941), pp. 27-28.

is too long" in the institution? This depends on the individual child. Symptoms of lengthy institutionalization may be some of the following:

1. Too easy acceptance of authority.
2. Continuous efforts to circumvent just restrictions.
3. Loss of initiative.
4. Loss of ability to assume self direction.
5. Fear of change.
6. Shrinking from community contacts.⁵

But for some children, especially adolescents who are unable to accept substitute parents in a foster home, group living experience can provide the basis for growth toward maturity. In the close group of the cottage with cottage parents, in group relationships at work and recreation, there are contributions for growth.

The basic elements of the group living experience that the institution provides for the child may be said to consist of the close group association provided by the cottage or dormitory unit under the guidance of a house parent, a couple, or a so-called supervisor; in the close group relationships to be experienced in clubs and recreational activities found on the campus under various leaderships and the inter-action of those groups; and in the looser association between all the children in the institution, that is, the institutional community as a whole.⁶

Considerations of how group living may be guided towards emotional growth are:

1. Among the elements contributing to the preparation

5 Ibid., p. 29.

6 Suzanne Schulze, "How Does Group Living in the Institution Prepare the Child for Life Outside," U. S. Children's Bureau, 1944, p. 4.

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But for some children, especially adolescents who are unable to accept substitute parents in a foster home, group living experience can provide the basis for growth toward maturity. In the close group of the cottage with cottage parents, in group relationships at work and recreation, there are contributions for growth.

The basic elements of the group living experience that the institution provides for the child may be said to consist of the close group association provided by the cottage or dormitory unit under the guidance of a house parent, a couple, or a so-called supervisor; in the close group relationships to be experienced in clubs and recreational activities found on the campus under various leaderships and the inter-action of those groups; and in the looser association between all the children in the institution, that is, the institutional community as a whole.⁶

Considerations of how group living may be guided towards emotional growth are:

1. Among the elements contributing to the preparation

⁵ Ibid., p. 23.

⁶ Susanne Schmeier, "How Does Group Living in the Institution Prepare the Child for Life Outside," U. S. Children's Bureau, 1944, p. 4.

for later life, which ones can be obtained through group living?

2. To really attain these ends, what kind of group living should be provided by the institution?
3. What limitations in institutional group living must be taken into account and what provisions should be made to supplement group living where it falls us in achieving important goals?⁷

The significant developments of progressive institutions may be stated here:

1. Understanding of the individual with recognition of the part the family plays in the development of the child.
2. Recognition of the meaning of separation and realistic attitude toward limitations of sick parents and what can and cannot be expected of them.
3. Acceptance of the complementary nature of institutions and foster home services not in competition with each other.
4. Placement resource regarding each child's individual needs.
5. A slow recognition of the institution's basic function as group living rather than family living and the resulting need for integration of all services in the institution, especially group work and case work.⁸

Group living may prepare the child in the following areas: a) how to get along with people of various ages, sexes cultural backgrounds; b) how to develop a reasonable depend-

7 Ibid., p. 4.

8 Suzanne Schulze, "Group Living and the Dependent Child," Proceedings of the National Conference of Social Work, 1946.

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ence as well as independence; c) opportunities for self-expression; d) experience in democratic living of daily life.⁹ It is further spelled out by Behrends in a list of seven recommendations, both practical and spiritual.¹⁰

Some of the more practical considerations for the institutional child facing community living are: a) economic adjustment, b) living in the same community or same world with relatives, c) creating a satisfying social-recreational life with friends, and d) the problems of marriage and parenthood.¹¹

To sum up, the preparation for the adolescent in the institution for community living is the prime purpose and value of the institution for the child. It is not the job of the institutional program to adjust the child to the institution, but to prepare the child for his proper place in society. While in the institution he should mingle with the children in the community, in school, work, play, go out on his own in the community, visit home, relatives and friends.¹²

9 Suzanne Schulze, "How Does Group Living in the Institution Prepare the Child for Life Outside," U. S. Children's Bureau, 1944., pp. 4-5.

10 Frederick G. Behrends, "What Preparation Should an Institution Give a Child for Better Living in a Community?" Tennessee Public Welfare Record, June 1947.

11 Edith Verry, "Problems Facing Children With A Relatively Long Period of Institutional Care," Proceedings of the National Conference of Social Work, 1938.

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Psychology of Adolescence

Adolescence viewed as a natural phenomenon has certain psychological dynamics, apart from additional complications that arise as by-products of deprivations in early life, frequent changes of different, inconsistent foster parents, and institutional life.

In many grade and high school children feelings of insecurity and the longing for, as well as the rejection of, dependency, are recurrent. . . . In our present days, another nuclear emotional conflict stands out (in addition to the oedipal conflict.) It centers around emotional insecurity, a conflict between competitive ambition and stress upon individual accomplishment, and a deep longing for dependence and security.

But for the adolescent period the outstanding problem found is certainly the feeling of inadequacy. In addition to the skills that the grade school child must achieve in order to have self-regard and the approval of his social world, the adolescent must acquire skills which make him feel strong in himself and attractive to the opposite sex.¹³

Miss Hamilton goes on to say:

Since adolescence is a period when the impulsive life is strong and the ego not too secure, it is to be expected that any disturbance of the ordinary controls of society, increased tensions, dislocations of living routines, and the rest, predispose young people to a high incidence of acting out.¹⁴

This is a period of conflict and stress. There are anxieties because of physical development, and emotional changes.

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He will be preoccupied with himself, his body, his feelings about people, sex, his own capacities and interests. He will be on the verge of having adult authority, and yet unable to achieve complete independence. He is now a dependent child, yet striving to grow up. There is "a resistless forward movement in growth countering the urge to remain a child."¹⁵

There are also the drives to be self-assertive, to prove bodily competence. With the boy there is physical strength and skill. With the girl the emphasis is on beauty and attractiveness. There is also the need to prove adulthood through economic independence. Further there is the need to find a place for himself with the opposite sex. Finally there is the need to take an active part in social life. These drives are mingled with former childhood idealism which make acceptance of reality extremely difficult. His identifications are with others than his own parents.

It is further claimed that since the ID impulses of the adolescent are intensified and the superego is weak or inoperative, resulting in increased anxiety, there is need for limitations of freedom and for the use of firm authority.¹⁶

¹⁵ Caroline Zachry, "A New Tool in Psychotherapy With Adolescents," Modern Trends in Child Psychiatry, Lewis and Pacella, Editors (New York: International Universities Press, 1945), pp. 80-81.

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An institutional setting makes use of authority and the program of activities for helping the disturbed adolescent.

Sports, shop work, vocational interests can all be offered to help the youth lessen tension, achieve skill, and enhance self-valuation and self-respect. The socially pathological temptations and stimuli of home, or neighborhood, or both, are thus eliminated or at least reduced. The specifics in institutional treatment for the group include nonpunitive authority - the other constants being a therapeutic attitude and outlets adapted to relieve adolescent pressures and strengthen personality achievement.

Institutional activities may be so graduated as to provoke less rebellion or anxiety. Whenever repressions are loosened up, it is easier to get at the central constellation of difficulty. The realistic framework of institutional life touches off reactions which may suddenly bring the repressed feelings to the surface and create insecurity and sometimes panic. The fact that the young person is physically accessible may make efforts at individual and group therapy (which would never attract at long distance and over weekly intervals) more feasible.¹⁷

"Because the adolescent is between two worlds, but reaching out toward new experiences, he tends to identify with someone not like himself."¹⁸

Accordingly, the restrictions and authority of the institution may be therapeutic for the anxious adolescent unable to understand and control his emotional drives because of lack of parental love and security in the former years of development. He may be able to work out his doubts and

17 Gordon Hamilton, op. cit., p. 268.

18 Gordon Hamilton, op. cit., p. 252.

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fears within the group since he feels he is not understood by adults, especially parental substitutes and parental figures.

Casework Considerations

The casework principles are based on the dynamic understanding of adolescence and the individualization of each adolescent. With regard to adolescents in an institution the case worker is able to help the child and parents primarily because of the setting.

The separation problem in the child care institution has a unique aspect. Institutional placement provides a neutral setting for the child and parent to work out the disturbance in their relationship to each other.¹⁹

Mr. Hallowitz, in his analysis of casework with institutional children, centers his thinking on "the separation problem . . . the kernel of casework in the institutional setting."²⁰ Some children are able to take separation. Others are not. Generally there is a strong drive to return to the family group or a wish that the parents were able to make a good home for them. With adolescents, although they tend to depreciate their parents even in normal living, in foster homes or in an institution there may be this drive to belong, to be part of their families, and be recognized as wanted

¹⁹ David Hallowitz, "The Separation Problem in the Child Care Institution, " Journal of Social Casework, April 1948, p. 145.

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by their families.

The caseworker's role, however, is differentiated from that of the other staff members principally by the fact that he meets with the child privately and is able to give the latter consistently the feeling of being considered as an individual.

Carried to its logical conclusion, the casework process has as its objective the reuniting of the child and family on a sounder basis, provided this is possible and desirable from the standpoint of the child's best interests.²¹

"The caseworker endeavors to help the child mainly by developing a strong supportive relationship and by helping him understand the reasons for his placements."²²

Then, too, casework with parents and relatives should be focused on their abilities for parenthood and the extent of their interest in helping the child.

Justine Polier quotes Mary Boretz:

A caseworker, sensitive to the child's inner experience as well as his outer responses, able to make the necessary interpretation to those living with the child, to support him, not in terms of changing the institution program for him but in terms of a better understanding on everyone's part including the child's can help towards his maximum growth and his earlier return to community living whether in his own home or in another home.²³

Gordon Hamilton suggests using the "transference in a supportive way to help the adolescent bring out his conflicts and channelize them in socially acceptable ways."²⁴

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²³ Polier, op. cit., p. 30.

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The young person is helped to grow into independence through strong indentifications with a worker who reinforces constructive defenses and offers an ideal, while sanctioning the adolescent's efforts to be himself.²⁵

Caroline Zachry has these suggestions:

In successfully treating adolescents it is necessary 1) to understand the emotional make-up peculiar to this stage of development, 2) to deal skillfully with the adolescent's parents who almost invariably present a specialized problem, 3) to use the secondary school as a therapeutic tool.²⁶

Other suggestions are noted:

The caseworker also can offer services of a concrete nature which will help the adolescent in his period of transition.

One of the greatest services caseworkers can offer the adolescent is an adult's secure belief that the adolescent can do things for himself, that he can make his own decisions, that he is a potential adult.

The social worker faces the challenge of making intelligible to the adolescent, and acceptable to him, the limitations society puts upon him.²⁷

The caseworker tried to help the girl to face the reality of her own individual life situation, to see the facts as they were not as she wished or feared that they might be.

25 Ibid., p. 274.

26 Zachry, op. cit., p. 80.

27 Dana L. Ingle, "Family Casework Services For Adolescents," Journal of Social Casework, November, 1947.

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At the same time the caseworker tried to help the girl's family to understand her better and where possible to modify those parental attitudes which must make her adjustment more difficult.²⁸

Some of these casework principles are slanted for adolescents in a family agency, or in normal living such as in school. Other ideas are tuned to the work with adolescents in such institutions as the R. I. Children's Center. Although it is often thought that institutional children are not really "different", they are "different" - in family heritage, family environment, economic status, and emotional needs.

It is recognized among workers in education and in child psychology that children who have spent their entire lives in institutions present a type of their own and differ in various respects from children who develop under conditions of family life.²⁹

And although institutionalized adolescents are potential adults, people working with them often feel they are dealing with adolescents who grew up physically but were not given the normal opportunities for growth in the emotional-mental, educational, recreational spheres. Accordingly, they are handling adolescents who wish to be thought of as adults, who are often immature and childish, but who also want so much to have adult status - sexually, economically, socially and with regard to personal freedom and self-respect. Yet without hav-

²⁸ Leontine Young, "The Treatment of Adolescent Girls," Child Welfare League of America, January, 1945.

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These will be noted in the cases to be presented.

The first two represent a group of five who were in other institutions at the time the study was made. This group consists of four girls and one boy. In general this group of children had little or no family life during most of their lives. They either had a long institutional life or many and frequent foster home changes. They were insecure emotionally because of early childhood privations, and therefore were unable to adjust to community life after discharge from the Children's Center. It seems to the writer that they were unable to remain in the community because primarily they did not have the inner strength and security, and therefore were unable to utilize and mobilize whatever potentialities they had for a measure of successful independent living as growing potential adults.

The second group consists of ten cases, the largest in any classification. To represent these the writer chooses four

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CHAPTER IV

PRESENTATION OF THE CASES

The Classification

For the purpose of illustrating the group of twenty-two adolescents the writer has selected the following eight cases which seem best to represent the group.¹

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cases, two of each sex. This group may be thought of as the relatively successful group since they were employed at the time of this writing. In comparison with the first group, these ten did not have appreciably better early childhood experiences. Yet because of their own abilities, some help and interest from a family member perhaps, and their ability to use the supportive help of the case worker and the institution staff, these adolescents got jobs by themselves or with the help of the case worker. Often they left their jobs or were discharged. Still, at this writing they remained in the community employed and self-respecting.

The third group consists of five adolescents who, though still in the community, have drifted uneasily from one job to another, and are unemployed at present writing. This group had similar backgrounds as group number two. Perhaps the second group did not possess noticeably more skills in any trade. Chance and individual opportunities probably cast their lots to keep the third group dependent financially. The writer chose two cases to represent the group of five.

Finally, there is the fourth group consisting of two cases in which there is insufficient follow up of their community adjustment. When last known both, a boy and a girl, returned to a family member. The boy now is living out of the State of Rhode Island with his father and has been released from the care of the Children's Division. The girl,

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though still under the custody of the Children's Division, is living with her father and step-mother. Because of a lack of recording, there are insufficient facts about their community adjustment.

Before his birth his mother separated from her husband and Roy was born out of wedlock, the putative father being unknown. As a baby, Roy was cared for in an infant asylum and thereafter in another institution until he became fifteen. Roy's mother was judged to be mentally defective and was committed to a school for defectives. Mother has claimed that her husband left her because of differences in religion. Maternal relatives showed little interest in providing a home for Roy. Thus Roy grew up in the confines of an institution, very rarely experiencing contacts in the community. His life for fifteen years was one of isolation from all people but those in the institution.

When Roy became too old to remain in the institution, and because of lack of interest on the part of relatives, he was committed to the Children's Division on a dependency charge. Accordingly, he spent about a year in the Children's Center which was a preparatory period for his entrance into community life.

Roy had presented particularly asocial behavior. He was childish, fearful of people, eager to make close personal relationships but unable to have people like him. His personality often seemed affectionate. He shunned the normal adolescent group and athletics, resorting to destructive behavior such as lighting fires, singing fire alarms, stealing, and injuring sadistically the cottage pet dog. Roy was given to temper tantrums whenever his childish demands were not satisfied and whenever a relative or friend who knew his family disappointed him since they were not able to tolerate his immature behavior up to visits to their homes.

Roy had a case worker who worked with him intensively while in the Children's Center. The worker allied intimately with Roy to help clear up some of his conflicts about his mother, half-brothers, relatives and friends. Roy visited his mother while in her institution, and so got a sense of belonging.

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CASES REPRESENTING GROUP I

Case 1.

Roy lived nearly all of his seventeen years in institutions. Before his birth his mother separated from her husband and Roy was born out of wedlock, the putative father being unknown. As a baby, Roy was cared for in an infant asylum and thereafter in another institution until he became fifteen. Roy's mother was judged to be mentally defective and was committed to a school for defectives. Mother has claimed that her husband left her because of differences in religion. Maternal relatives showed little interest in providing a home for Roy. Thus Roy grew up in the confines of an institution, very rarely experiencing contacts in the community. His life for fifteen years was one of isolation from all people but those in the institution.

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Roy had presented particularly asocial behavior. He was childish, fearful of people, eager to make close personal relationships but unable to have people like him. His personality often seemed effeminate. He shunned the normal adolescent group and athletics, resorting to destructive behavior such as lighting fires, ringing fire alarms, stealing, and injuring sadistically the cottage pet dog. Roy was given to temper tantrums whenever his childish demands were not satisfied and whenever a relative or friend who knew his family disappointed him since they were not able to tolerate his immature behavior on visits to their homes.

Roy had a case worker who worked with him intensely while in the Children's Center. The worker talked intimately with Roy to help clear up some of his conflicts about his mother, half-brothers, relatives and friends. Roy visited his mother twice in her institution, and so got a sense of belonging.

CASES REPRESENTING GROUP I

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Yet his frustrations mounted when the relatives and friends refused to participate in plans for Roy.

Roy was bordering on feeble-mindedness at the time of commitment. During his stay at the Children's Center his IQ showed a noticeable increase to seventy-seven. It was once thought he might be committed to the School for Defectives where his mother is. At school he was progressed in grades beyond his abilities. At junior high school he was in a special class. Personally neat and presentable, on first appearance he gave the impression of a well mannered young man. His health seemingly has always been good.

On discharge from the Center Roy was first placed in a rooming house, having found a job as an attendant in a large maternity hospital. He was unable to get along at either place. Another home was found and another menial job. But Roy had to return to the Children's Center for a few days. Then with another boy (who is also included in this study) a job was found for him, living quarters being a rooming house again. In a short time Roy had started a fire in the room, and the house was in flames. Notoriety was Roy's, although the newspapers did not disclose his name. Before the Juvenile Court judge Roy pleaded he knew no better because he had no parents to care for him, having had too long an institutional life. It was thought that he was a psychopathic delinquent after being observed and studied at two mental hospitals. Previous to his entrance into the community the consulting psychiatrist had considered him an immature adolescent with too much institutionalization. The school guidance department tried to help in job placement with little success.

Roy was given one brief spell to try to live with a maternal uncle. After being there for two days, he was returned to the psychiatric ward of the city hospital for further study. From there he was committed to the Juvenile Training School under the supervision of the Department of Probation, custody being released from the Children's Division.

It seems clear that institutionalization for sixteen years prior to his entrance into community life was an important factor to Roy's failure. Roy was born out of wedlock

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and rejected. His cry seemed always "to belong". Fearful, distrustful of people, he resorted to anti-social activities which seemed to draw a great deal of attention to him in the cottage and during his brief stay in the community.

Having no mother to give him love during the formative years, he was thereby unable to relate to people. Having no father, he was unable to be masculine, or relate correctly to authoritative persons. He must have had feelings of not being wanted and not being like other children who have parents and interested relatives. He had insight into the source of his difficulties since he realized his lack of parents and years of living away from a normal stream of life conditioned his anti-social behavior. Accordingly he was immature, with very little ego strength and no ego-ideal. It is a question whether continuing institutional life will help Roy or not. Yet it seemed to be the only course of action by the court.

The writer wonders also whether foster home placement during his first few years of life might not have been a better plan. Certainly at age fifteen, Roy seemed too old and too institutionalized to live in a foster home successfully. He consequently knew nothing of family life and community living.

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Case 2.

Judy is a seventeen year old girl who experienced a combination of early childhood institutionalization and several foster home changes. She was committed to the Children's Division when she was six years old. Her mother, who gave birth to her out of wedlock, died two years before commitment. Her father was unknown and the maternal grandparents refused to consider her as their responsibility. Consequently, Judy was very much alone in the world as a young child.

When she was born in a Massachusetts Infirmary, her mother was incompetent to care for her. Since the family had residence in Rhode Island, Judy was transferred to the R. I. Infirmary when only a small baby. From there a sectarian agency became active and placed her in an infant asylum until about three years of age. Then she spent about three years in a children's home. Her maternal grandparents lived and worked on the institution grounds, and it was once thought that Judy might be cared for in their home along with her brother who had been living there for some time. Yet these grandparents refused Judy; and even when Judy was a grown girl living in foster homes, she pleaded for them to show some interest in her just for a visit at least. They continued to reject her, however.

After commitment Judy was placed in a foster home. Then followed three changes of foster parents in four different homes. In the first Judy remained eight months. In the second she remained three years and ten months; in the third, four years and one month; and in the fourth, one year and two months.

During this period of early institutionalization and foster home changes, Judy was a demanding, uncooperative child. She tended to be obese. She was always irritable, moody, sullen, and unpredictable. Her personal appearance varied in neatness. She had a speech defect, facial acne, and needed glasses which she did not use when prescribed and bought. Although her behavior was not very agreeable in foster homes, she did not present any school problems. Her I.Q. was 100. She was not retarded in grade and liked school work. She participated in music

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and art groups.

All the foster parents had a great deal of difficulty with Judy. She would not become a part of the foster home family, preferring to find parental figures outside the home in the neighborhood. Her relationships with these adult friends brought her in conflict with the foster parents who were unable to have Judy's trust and confidence. Judy would rather share her troubles, big and small, with other adults. Case workers were unable to have positive relationships with her. She wanted foster home placement; then when a change occurred, she rebelled and defied the foster parents, her new parental figures.

Therefore, when nearly sixteen she was admitted to the Children's Center for a period of readjustment and study in a neutral environment. In the Center her rebellious, hostile behavior persisted. Yet her one positive virtue was her drive to continue and succeed in school when relations with the adult staff and the children in the cottages were strained with frequent arguments. Her own peers disliked her. The boys attracted her very much, although the Center offers few opportunities for activities of the two sexes together. She had a drive to be aloof and to be considered better than the others in the cottage.

Her placement in community life began with a foster home for about a month. She wanted to complete high school and work part time. She changed her plan, moved to a rooming house for working girls and found frequent jobs, each of which she lost quickly. At this period the case worker supported Judy intensely and considered her request to live with people to whom she became attached when once living in a neighboring foster home. These foster parents once were under state supervision in their childhood and so sympathized with Judy. But within two months she showed her unwillingness and inability to relate to these friends as was the pattern in other foster homes.

Her activities when not in high school, from which she was determined to graduate, were having the company of race track gamblers, older men of doubtful reputation. She became close to one gambler and said

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she would marry him. She pretended her age to be about twenty-one, deceiving this gambler. During this hectic period she was often absent from her residence, either wandering aimlessly in the streets or living with her male friends in a hotel or cafe.

Psychiatric consultation was offered her at the Children's Center and also psychiatric observation at the city hospital. Her diagnosis was indefinite, probably primary behavior disorder, schizophrenic personality. Following psychiatric study she was admitted to a training school for girls where she is still under training at this writing.

The writer indicates here the life and behavior of a child born out of wedlock not having anyone to belong to, without having family or friends, or feeling wanted. Six years in institutions deprived her of consistent loving parents during the first years of life. Consequently she was always having to adjust to different sets of institutional staffs and later to foster parents. Her desire to seek adult relationships outside of the foster home seemed to indicate her extreme adolescent tendency to find confidences in others than parental figures. In normal adolescents this is the usual activity, the real parents being devalued. In Judy's case she devaluated her foster parents and found attachments in extreme measure with other adults. When she was finally placed with one family to whom she had become attached, she reacted as in the past - rebelling against them and seeking other adults, this time race track followers whom she may have looked on as kindly father figures.

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Judy seemed to have good insight into her need to succeed in school. She demanded strong attachments outside the foster home but she was unable to utilize this insight and her good intelligence because of lack of parental support and love from the beginning.

John was committed to the State School for Mental Defectives. There were no interested relatives available. John was barely a year old when he was committed to the Children's Division and placed in a foster home. For reasons which will be stated, John was placed in eight different foster homes, having nine changes. In the first foster home the foster parents drank heavily and John was transferred to another home after nine months. This couple was eager to adopt John, but after six months they decided they were unable to handle his temper displays. In the third home he remained two years and the foster parents grew to love him until his overactivity, demonstrations and demands forced them to ask for his transfer. In home number four John remained two years and eight months, the same behavior resulting in his change again to another foster home. Here in the fifth placement John grew up for eight years. Here he found a place, a family to belong to. Here he made his life's plans. Yet he inevitably had to leave for another home in which he lasted two months. He requested to return to the former foster parents, where he had already lived eight years. He remained there fourteen months until Foster mother became too ill to care for him. Following this disappointment he lived in two more foster homes for two months in each home. At this point at age sixteen he was admitted to the Children's Center.

His personality during this period of many foster home placements manifested the following traits: continually demanding, temper tantrums, selfishness, abusive to other children, unable to be disciplined, inability to relate to foster parents except in terms with whom he spent over nine years. Personally he was uptight. He had periods of excessive masturbation. He seemed insecure, aggressive, often untruthful in speech. Yet he did have a strong drive to finish high school, and he had ideas of going to college.

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CASES REPRESENTING GROUP II.

Case 3.

John is eighteen years old, possessing a normal intelligence. He is one of three siblings born out of wedlock, the father being unknown. When John was born, his mother gave up his care to the State Infirmary. About that time she was committed to the State School for Mental Defectives. There were no interested relatives available. John was barely a year old when he was committed to the Children's Division and placed in a foster home. For reasons which will be stated, John was placed in eight different foster homes, having nine changes. In the first foster home the foster parents drank heavily and John was transferred to another home after nine months. This couple was eager to adopt John, but after six months they decided they were unable to handle his temper displays. In the third home he remained two years and the foster parents grew to love him until his overactivity, demonstrations and demands forced them to ask for his transfer. In home number four John remained two years and eight months, the same behavior resulting in his change again to another foster home. Here in the fifth placement John grew up for eight years. Here he found a place, a family to belong to. Here he made his life's plans. Yet he inevitably had to leave for another home in which he lasted two months. He requested to return to the former foster parents where he had already lived eight years. He remained there fourteen months until foster mother became too ill to care for him. Following this disappointment he lived in two more foster homes for two months in each home. At this point at age sixteen he was admitted to the Children's Center.

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and becoming a professional man. During these years his mother was released from the School for Mental Defectives and married. Approached with the problem of John's need for a family to belong to, she rejected any consideration of showing any interest in John. He was sixteen and alone to face the world.

In the Children's Center John presented fairly identical behavior as in the past. He did not know how to get along with adults or his own group of adolescents. He was immature, indulging in childish behavior such as eating a lot of candy, ice cream and cake which he bought with money earned from his newspaper route. He was like an animal in his eating, dressing and toilet habits. The cottage parents took a strong interest in him and helped to prepare him for the community. He was gradually helped to be cleaner, less abusive, gentlemanly and industrious. John continued high school. Although his behavior continued to be erratic, childish and demanding, it was felt he progressed. He remained in the Children's Center nearly two years. At eighteen he was discharged from the Center and also from the care of the Children's Division. The case worker helped him to adjust to a job, living quarters, money, etc. in his first few weeks of community life.

In the first month he was involved with Roy (of Group I) in the rooming house fire. At that time he worked in a department store. He was considered innocent in the arson episode. Later he continued high school, working part time and paying his own expenses all the way along. He did many menial tasks and persevered until he graduated from high school. At the present writing he was known to be employed at a large jewelry manufacturing concern.

John was helped by psychiatric consultation at the Children's Center, a Child Guidance Clinic and a school counsellor. At the time of his entrance into the community the Family Service Society became active. It is not known if they continued to serve John. The personnel manager at the jewelry plant has taken an interest in him and offered to help him as much as he could while John worked there.

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cially in the first years of life. It was perhaps unfortunate that he had nine foster home changes. He showed the effects of lack of mother and father. Often his behavior seemed pre-psychotic. He was fortunate to have several foster parents who were able to give him patient understanding and affection before he became adolescent. He was fortunate in spending his institutional life during adolescence instead of during early childhood as many other children have done.

It was also fortunate that John was helped by the case worker, school counsellor and personnel manager.

John spent two years in the Children's Center at a time when most children benefit from institutional life - during adolescence. He spent his early years up to adolescence in foster homes where it is generally thought children should be if their parents are unable to care for them.

During his stay at the Children's Center his married sisters visited him. Allen had a strong need to idealize his father in spite of the neglect he suffered in his father's home. He often praised the work of his father and seemed to desire to identify with him in work and strength.

When he became sixteen, after being in the Children's Center for eight months, Allen was placed in a self-support foster home. He obtained a job in a mill, paying the foster parents for room and board. He visited his father and married sisters periodically.

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Case 4.

Allen is a seventeen year old boy with a relatively brief period of dependency upon the Children's Division. He is the third of four siblings who were brought up quite crudely and cruelly by uneducated, inadequate parents. Allen had very little education. He was made to work by his alcoholic, abusive father whom he feared. Following the death of his mother when Allen was fifteen, complaints were made to the local Society for the Prevention of Cruelty to Children. The home conditions were below standard. The children were exploited and abused. There was little opportunity for normal healthy childhood growth emotionally, educationally, and in play.

When Allen was committed to the Children's Division, he was admitted to the Children's Center where he remained until he entered community life for employment. He was barely able to do fourth grade school work, although in an ungraded class grade five. His IQ was fifty-nine. He was physically rough looking, speaking without any idea of correct grammar so that he was often the innocent object of cleverer boys' jokes. It was not too long before Allen became one of the favorites in the older boys' cottage. Although awkward in athletics at first, soon he was adept in baseball and football; and in other group games he was cooperative and friendly. He was ready to help the staff in cutting the tall grass, preparing the field for a bonfire on the Fourth of July, and handy with tools in fixing up the recreation room. His mental retardation put him in an uncomfortable position in school and with the boys of normal intelligence.

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He has seemed to get along fairly well in spite of his low intelligence.

Casework with Allen was in the area of working with relatives while he was at the Center and later when he went into the community. Allen used the service of an employment agency in locating his job where he still is as far as the recording indicates.

Allen seemed not to have suffered greatly from parental neglect and abuse. At the age when he could easily depreciate his father, Allen strove to idealize him and praise him. Allen may have expected to be so treated and still worship his father.

Despite his feeble-mindedness Allen is social, friendly, getting along quite well with his friends and adults. He may not be able to accomplish skilled work, but he may be able to continue in the community employed at tasks that demand strength and hard work and a minimum of mental activity.

Case 5.

Ann is a seventeen year old girl, the third of six siblings. Since mother was deceased, the bulk of the care of the home and the children fell on the two older sisters and Ann. Father always earned sufficiently, but his utter lack of responsibility in every way kept the home in extreme poverty and neglect. The children suffered from chronic skin infections, malnutrition. School attendance was most haphazard because of poor health, lack of proper clothing, inadequate supervision. Teachers complained of the neglected condition of the children. Ann herself did not attend school regularly since her father forced her to do the household duties. This was especially true when the oldest sister left the home and the second oldest sister refused to submit to her father's demands.

Frequent complaints to the Society for the Prevention of Cruelty to Children failed to help matters. There did not seem to be any progress in cleaning up the house at least in order to control infection that had spread to all family members. A private child placing agency cared for the two youngest children in a foster home until father's promises to pay for their support did not materialize.

Ann was finally committed to the Children's Division with her three younger siblings on a neglect charge when she was fifteen. Her brother, Michael, is included in this study.) At the time of commitment the four children had to be admitted to the city hospital for treatment of scabies, lice and malnutrition. Ann, in addition, had her tonsils and adenoids removed. This operation helped her breathing and her speech. At this time Ann was untidy, dull, and seemed to be antisocial. In spite of neglect by her father, she had a desire to return home to him. Other positive aspects in the family were their regular church attendance and their close family ties.

Ann was admitted to the Children's Center along with her siblings, and soon she settled down to make an adequate adjustment there. Generally she was cooperative, well liked by her group and adults. She was also demanding, subject to temper fits, and untidy. In school she repeated the eighth grade. Yet she made a real attempt to progress, although handi-

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capped by an IQ of sixty-nine. She worked in the dining room, with pre-school children, and in her cottage. She attended a group in a girls' club. She had many girl friends and flirted with the boys. During this period her father visited seldom, but her older sisters visited occasionally.

About age sixteen Ann was placed into the community. A half brother in North Carolina showed some interest in giving her a home there. The worker gave Ann fairly good support and soon placed her in a wage home. She was a mother's helper. Her lack of steadiness and responsibility caused her to quit this home and look for private employment. When her searchings failed along with that of a girl friend (also included in this study) she returned to the wage home where she remains at this writing.

Ann always appeared to be an insecure, mentally slow girl presenting temper displays and strong sexual strivings. At the Children's Center she refused psychiatric consultation.

Ann is an immature adolescent girl who was forced to assume household responsibility long before she was able to and before her normal and natural childhood pleasures were satisfied. She did not have the normal period of dependency to give her support for later independence. Accordingly, the security of the wage home may be sound treatment for Ann. Her ability to get along with people is to her advantage. Yet it was felt she was unable to face and accept the reality of her father's rejection of her and her siblings. It would seem that continued guidance and support by the case worker and foster parents would suffice to guide Ann towards a degree of maturity and successful community living.

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Case 6.

Mabel is an eighteen year old girl, the oldest of five siblings. There was some doubt as to whether the father was truly her father. The parents presented most inadequate capacities for parenthood. Mother was continually ill. Father was alcoholic and schizophrenic, having been in the State Mental Hospital on two occasions. There was never enough money for food and clothing. The picture was one of extreme neglect, and Mabel, at the age of nine, with her brothers and sisters, was committed to the Children's Division on a neglect charge. They were all suffering from malnutrition at this time.

Mabel and her sister were soon admitted to a private home for children where Mabel stayed for six years. Following this, when Mabel was fifteen, she spent a year in the Children's Center. About the age of sixteen she was placed in a wage home as a mother's helper. This lasted for a month, and a maternal aunt decided to take Mabel into her home on the basis that board was paid by the Children's Division. When her aunt was unable to continue to provide her a home, Mabel returned to a wage home where she is still employed as a mother's helper.

Since commitment the parents have been uninterested even in planning to visit Mabel at the Home or in the Children's Center. They were reported to have moved many times and have been employed in many different jobs. With each worker assigned to the children and family, there was always a question as to the whereabouts of the parents. When they were located, no positive planning could be made with them.

Mabel manifested quiet, dull, unemotional behavior. She was moody, not having very tidy personal habits. There were various reports previous to commitment and while she was at the Home and the Children's Center that Mabel was a childish girl, playing always with much younger children. Since commitment her IQ has risen from eighty-four to one hundred six, yet she seemed unable to function on the normal intelligence level. She had a healthy interest in school and wished to complete junior high school at least. In the Home she seldom played or got along with children her age. Rather she preferred to play with younger children and even to be their nurse. In the Chil-

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dren's Center she was not a group participant. She had an interest in music and art; but her prime desire was to be a nurse and care for small children which she did in the wage home. In the Center, her skin rash was attended to and her eyes were tested for eye glasses which were prescribed.

In the community Mabel continued to be childish. She had few friends of either sex. Her maternal relatives showed only temporary interest in her, and she seldom saw her parents. Mabel was still untidy, moody, and seemed always to be suppressing emotional expression. Throughout her life there was little or no interest in religious observance. Casework with Mabel consisted of occasional support and preparation for changes in environment. No other services were active except the usual psychometric testing.

Mabel is obviously a girl who felt the emotions of neglect and rejection. She hardly was permitted the normal expressions of childhood when she was home. Thus it seemed she regressed as if asking to be treated as a small child which she had missed when living with her parents. She seemed to present a withdrawn, schizoid personality. Her desire to care for small children seems to be a sublimation of her own need to be cared for as a child. Since she was not given the attention and love which is due all children, she showed this need by caring for other children at the private Home and in a wage home. Her withdrawn personality is preventing a normal integration into community life. Mabel is clearly maintaining a dependency at a time when she might rebel towards greater freedom and independence.

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CASES REPRESENTING GROUP III

Case 7.

Albert is a seventeen year old boy, the fourth of five children. Not much is known about Albert's early life. An older sister married, and two older brothers joined the armed services. Albert's other brother was committed to the Children's Division after the parents died. At that time Albert was placed in the home of his married sister. There were reports of neglect by the parents who were supposed to be both alcoholic.

Albert lived for five years with his married sister. For a period of time Albert got along well. When he entered adolescence, he began to follow a rough teen-age crowd. This led to truancy from school, stealing, and rebelling from the authority of his sister. It was at this time that Albert was committed to the Children's Division, at the age of fourteen. His schooling then was retarded because of frequent school changes and repetition of several grades. There was little church attendance. At the time of commitment Albert was deficient in vitamin B, he had body rashes, nervous twitchings, a cold, and styes in his eyes. He was resentful, defiant, rebellious. An IQ of eighty-seven indicated a dull normal intelligence.

After commitment he was admitted to the Children's Center where he remained for fifteen months until the time of his entrance into the community. Medical care soon cleared up his health defects, and Albert settled down to adjust quite well in the institution. The cottage parents considered him a friendly, cooperative, likeable boy. He was a boy who spread humor naturally. He did not seem to be one to get into trouble. In school he was a conscientious student, desiring to complete junior high school which he never did since he quit at age sixteen.

Albert got along well with boys his own age and also with a few girls in the Center. He was always very friendly and jovial with everyone. In athletic groups Albert was not too active, although he was a participant.

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After reaching age sixteen, Albert went to live with his blind maternal aunt. He then quit school and

went to work, having five different jobs within a year. Yet he did get good experience as a grinder in a jewelry plant.

The case worker at that time felt that Albert was lazy and tried to interest him in finding work. Psychiatric consultation at the Center and counseling service at the school placement office were used. But after failing to keep several jobs, Albert seemed to resist finding another. His clothing, his appearance and attitude indicated a negative response. At this writing Albert is still out of work.

In the home of his blind aunt, Albert is helpful to her. His brother returned from the army and a rivalry stirred up between them. From this conflict Albert withdrew and presented a "don't care" attitude. Casework support of Albert has been mainly that of help in job finding.

Albert has impressed the writer as a normal boy with normal problems of attaining independence complicated by the lack of real dependence in the early years. Albert got along well in the Center, it seemed, because he was dependent there. Previously, with his married sister he was unable to accept authority. With his aunt he was apparently doing well, except for frequent job changes, until the return of a brother who aroused a sibling-rivalry which forced him to wish to be a small child again, not caring to fight or demand his own rights as a person. It would seem that a neutral setting apart from his family would help Albert grow and realize his potentialities. His normal pleasant personality is to his favor.

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Case 8.

Jerry is a seventeen year old boy, the last of eight children, who was committed to the R. I. Children's Division on a neglect petition when he was eleven years old. Older sisters married and left the home which was one of chronic conflicts, periodic desertions by mother and father. The children were always physically and emotionally neglected. They were ill fed, frequently truant from school, and lacked wholesome parental supervision. Accordingly, complaints were made to the Society for the Prevention of Cruelty to Children, but there was no attempt on the part of the parents to ameliorate even the physical aspects of neglect. Mother was alcoholic and had a series of epileptic seizures. From the beginning the marriage was one of suspicion and distrust. Maternal grandmother and grandfather were situated quite well economically, but offered mother little affection, and disapproved of father. Father, in turn, was once very fond of his children, but due to mother's accusations that he was unfaithful he deserted the family, failing to provide for their welfare. Mother had ample reason to suspect and accuse father for he was attracted to many women. Mother claimed she loved father, yet she degenerated gradually, unable to hold her husband's love or give her children affection and proper care. Her desertions left the younger children alone, often without adequate food. She finally was committed to the State Hospital for Mental Diseases.

Not much was known about Jerry's relations with his parents except that he gave them no difficulties and was considered well behaved. He had strabismus of the right eye and scabies. It was natural that with truancy from school he was retarded, being in the third grade of an ungraded room at the time of commitment. There was little interest in church attendance.

Jerry and a brother were committed by the Juvenile Court and father was ordered to pay for their support. He kept this up at first. There were poor adjustments in a foster home and in the home of maternal aunt where he lived with his brother and sister. In these two homes there was little supervision and affection. Jerry lacked parental love and

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was unable to form close relationships with substitute parents. Between and following these placements he spent three years and four months in the Children's Center, where he got along quite well in comparison with his stay in a foster home and relative's home. When he became sixteen he went to live and work in the community after leaving school in the seventh grade. In the Children's Center he had companionship of a brother, and his married sister was interested in visiting them. Jerry easily expressed his hostility to her. Although he got along well in the cottage group he was defiant against adult staff. Jerry's IQ in a series of tests ranged from seventy-two to ninety-one.

When he went to work, the case worker found him a job as an attendant in a private mental hospital with room and board. There he was not reliable. Soon he worked in another hospital, a hotel, and when last heard of was applying for work in an out of town mental hospital. Through it all he was hostile to worker and adults.

Jerry was able to face the realities of a job, day-to-day living, but his inability to accept authority blocked his progress. He needed adult support and dependency to grow into relative maturity. These he never had from birth. His father had little interest, never offering parental love which Jerry needed. He did, however, attempt to live with his sisters.

Jerry seemed to manifest a personality instability which may have its cause in neurotic or psychotic parents. The period of over three years that Jerry spent in the Children's Center following commitment did not seem to predispose him either favorably or unfavorably for community living, although this period may be looked upon as one of protection from further neglect by his parents. Jerry's need to idealize his parents made foster home acceptance difficult. His drive was to return to his family, to the home of his married sister.

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There is a question whether a new case work relationship will be beneficial to Jerry. He has been unable to relate positively to case workers and to advice in authority. On the positive side Jerry appears mentally capable of performing on a job providing he has adult patience and understanding to support him.

CHAPTER V

DESCRIPTION OF THE GROUP

The group of twenty-two adolescents will be described under various aspects: family background, age at commitment, adjustment in the Children's Center, adjustment in other institutions and foster homes, intelligence quotients and education, behavior patterns, and last known disposition of the group.

Family Background

The group, consisting of thirteen boys and nine girls, came from Catholic and Protestant families. Fourteen are Catholic; seven are Protestant; and one, a girl, was born of a Catholic mother and Protestant father.

The following parental situations were found at the time of the study: The mothers of eight adolescents were deceased. (Only seven mothers had died. Two children under study are sister and brother.) The fathers of two had died. And both parents were deceased in only one instance.

Three were born out of wedlock, and another was suspected not to have been fathered by her mother's husband. Four sets of parents were separated. Three sets of parents are living together. Four mothers were committed to institutions - one to a reformatory and two to the School for Mental Defectives. The other was committed to the State Hospital for Mental Dis-

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cases. In only two cases did children return to a parent - both to fathers. In two cases mothers remarried; and in three fathers remarried.

Generally it can be said that the living parents were irresponsible. They were mentally and emotionally unable to plan for their children. During the periods when the children were in institutions or in foster homes the parents were seldom very interested in them. In six cases parents were alcoholics, five of them being the fathers. In one case the mother was epileptic. In one case the mother was tubercular, the mother later dying and the father remarrying. In another

TABLE I

PARENTAL SITUATIONS OF THE GROUP AT
THE TIME OF THE STUDY

Situation	Mother	Father	Both	Totals
Deceased	7	2	1	10
Separated	-	-	4	4
Divorced	-	-	2	2
Unmarried mother	3	-	-	3
In Institution	4	-	-	4
Together	-	-	3	3
Remarried	2	3	-	5

Age at Commitment

Children in this group were committed to the Children's Division from ages ranging at birth to fifteen years. The mean age was 9.6 years. (See Table II, page 50.) Examination of this table indicates that half of the group were committed between the ages of eleven to fifteen, and half be-

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TABLE II

DISTRIBUTION OF THE AGES OF TWENTY-TWO
 ADOLESCENTS AT TIME OF COMMITMENT
 TO THE R.I. CHILDREN'S DIVISION

Age at Commitment	Number
15	3
14	3
13	2
12	2
11	1
9	3
8	3
6	1
5	1
3	1
birth to 1	2
Total	22

tween nine and birth or in the first year of life. But between the ages of eight to fifteen, seventeen of the children were committed.

The Intelligence and Education of the Group

The IQ range is from fifty-nine to one hundred and six, the mean IQ eighty-four. The latest test scores were used. Table III on page 52 shows the distribution of the IQ's according to sex. Since three girls and three boys each had IQ's above ninety, there can be no discernible difference as to sex. Below IQ's of eighty-three there were equal numbers of boys and girls, five in each sex. Sixteen adolescents have IQ's under ninety. This group may then be considered a dull-normal group which tends toward the normal.

Table IV on page 53 indicates the various educational adjustments of the group. All but one girl were retarded, and she was in her normal grade. All of the eighteen who finished their education in junior high school were in ungraded and special rooms because their ages and size would make them uncomfortable in grades according to their school performance. Only one boy was able to complete high school after discharge from the Center. Only three entered high school, and four continued their education after leaving the Center. One girl went to night school and two continued in regular high school. One boy studied in a religious order. This group can there-

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tween the ages of eight to fifteen, seventeen of the children
were committed.

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TABLE III

THE DISTRIBUTION OF INTELLIGENCE
 QUOTIENTS OF THE TWENTY-TWO
 ADOLESCENTS

I.Q.*	Male	Female	Totals
100-106	0	2	2
90-99	3	1	4
80-89	6	3	9
70-79	2	2	4
60-69	1	1	2
50-59	1	0	1
			22

* Latest Test Scores Used

fore he said to be at your educational advantage over the normal group of adolescents in a normal family who complete high school at the usual age of about eighteen without retardation and deprivations in family living.

Time Spent in the California Center

The time in sessions spent in the Center was from three to seventy, the mean being thirty. Often the time spent

TABLE IV

THE EDUCATIONAL ADJUSTMENT OF THE GROUP AT THE TIME OF THE STUDY

Educational Adjustment	Number
Continued Education	4
After Age 16	
Retarded	21
Completed high school	1
Normal grade	1
Reached high school	3
To junior high school	
(7th grade)	7
(8th grade)	8
(9th grade)	3

fifteen years each. These were either the infant asylum, the orphanage, or the training school for girls. In one case the institution was a religious school out of the state.

Time Spent in Foster Homes

Fifteen of the group lived in foster homes and seven did not. Of the seven who lived for five years with his married

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Time Spent in the Children's Center

The time in months spent in the Center was from three to seventy, the mean being 21.9 months. Often the time spent in the institution was not continuous. There were in most cases returns to the Center. Table V on page 55 indicates the distribution. This of course does not point out the length of time some of the children spent in other institutions previous to commitment or admittance to the Center.

Time Spent in Other Institutions Prior to Admittance to Center

Seven children were in other institutions prior to admittance to the Children's Center - three boys and four girls. It was noted that the longest time was spent in religious institutions where four children spent three, four, six and fifteen years each. These were either the infant asylum, the orphanage, or the training school for girls. In one case the institution was a religious school out of the state.

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sister prior to commitment. It was noted that the children who spent the longest time in Foster homes also had many changes of Foster homes.

The range was from two months to fifteen and a half years. The number of Foster homes ranged from one to nine. Eleven children had from one to three Foster home changes; and two had nine changes. There were two who had five and six changes each.

TABLE V

NUMBER OF MONTHS THE TWENTY-TWO
ADOLESCENTS SPENT IN THE
CHILDREN'S CENTER

Number of Months	Number of Children
70	1
63	1
40	1
29	1
27	1
26	3
25	1
23	1
15	3
12	3
11	1
9	1
8	1
7	2
3	1
Total	22

sister prior to commitment. It was noted that the children who spent the longest time in foster homes also had many changes of foster homes.

The range was from two months to fifteen and a half years. The number of foster homes ranged from one to nine. Eleven children had from one to three foster home changes; and two had nine changes. There were two who had five and six changes each. Two were returned to former foster homes after spending some time in other homes.

Behavior and Personality

In order to differentiate the personality characteristics, the writer will describe certain small groups that seem to go together.

The normal group usually got along well with adults and with their own age group. They presented no unusual personality problems that came to the observation of foster parents, social workers, consulting psychiatrist or cottage parents. Occasionally there was a report from the cottage parents or the foster parents that this particular child was too difficult to handle. The writer realizes that all children are bound to cause some trouble, and that a deprived group has good reason to be hard to handle at times.

The moderately disturbed group presented the following kinds of problems: defiance of authority, unreliable, un-

56

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The moderately disturbed group presented the following

kind of problems: defiance of authority, unreliable, un-

able to learn from experience, often untidy, nervous habits, temper fits, little self-confidence, truancy from school, demanding, sexual conflicts, moodiness, childish behavior, withdrawal tendencies, sibling rivalry, destructiveness and tension.

The severely disturbed group manifested the following types of behavior: illnesses of probable psychic involvements, excessive masturbation, uncouth personal habits, inability to get along with other people, gross stealing and lying habits, paranoid trends, frequent and severe temper tantrums.

The very severely disturbed group showed the following manifestations of behavior: infantile demands that continued for years after early childhood, over-dramatic attitudes, hysteria, seductiveness, strong hostility and uncooperativeness, sexual delinquencies, asocial behavior, no concept of morality, extreme moodiness and sullenness, various degrees of tidiness, and unpredictable behavior.

These kinds of behavior represent that of the entire group studied during most of their lives according to the recording.

Table VI on page 58 indicates the number of adolescents in each group described above.

Disposition of the Adolescents

Table VII on page 59 shows that the number of months

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TABLE VI

SEVERITY OF THE PROBLEMS OF THE
 TWENTY-TWO ADOLESCENTS

Severity	Number	Percentages
Normal	7	31.8
Moderate	9	40.9
Severe	3	13.6
Very Severe	3	13.6
Totals	22	99.9

TABLE VII

NUMBER OF MONTHS THE TWENTY-TWO ADOLESCENTS
SPENT SINCE LEAVING THE
CHILDREN'S CENTER

Number of Months	Number of Adolescents
21	1
19	3
18	3
17	2
16	2
14	1
13	1
10	2
9	1
8	1
7	3
6	1
5	1
Total	22

spent since leaving the Children's Center ranges from five to twenty-one. The writer figured the time as of the end of January, 1949, when the cases were being studied. The mean number of months was 13.4. The fact that some of the adolescents are at present in other institutions may be interpreted as not being in the community. Yet the writer totalled, in this table, the number of months passing since this group left the institution for community living. That some did not remain in the community is noted in Table VIII on page 61.

In Table VIII it may be seen that this group has been moderately successful in remaining on jobs - ten are working according to the latest recording. It is explained in the Table notes how the total of twenty-five was found.

Table IX on page 62 shows the break-down according to particular jobs. In no case was only one job held by one adolescent. Usually they went from job to job. For boys, hospital work was popular. For girls, work as mother's helper was popular. The position as mother's helper in a private family seems to offer a rather dependent, controlled situation. One boy joined the religious order where he was cared for as a younger boy. After completing the novitiate he was dismissed because of infraction of a religious rule. The writer has made a category of "miscellaneous" because the recording did not make clear the exact nature of the jobs. Because Rhode Island (and Providence in particular) is a jewelry manu-

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TABLE VIII

DISPOSITION OF THE TWENTY-TWO ADOLESCENTS AS OF
JANUARY 30, 1949 SINCE DISCHARGE
FROM THE CENTER

Disposition (a)	Number
In other institutions	5
Employed	10
Unemployed	5
To own parent	2
Out of care	3
Total	25 (b)

Explanation:

(a) Almost all were employed at some time.
This is last known location.

(b) Total represents the following:
Of two, to own parent - one is out of care.
Of three out of care
one - to own parent
one - employed
one - in another institution

TABLE VIII

DISPOSITION OF THE TWENTY-TWO ADOLESCENTS AS OF
JANUARY 30, 1949 SINCE DISCHARGE
FROM THE CENTER

Disposition (a)	Number
In other institutions	2
Employed	10
Unemployed	2
To own parent	2
Out of care	3
Total	22 (b)

Explanation:

(a) Almost all were employed at some time.
This is last known location.

(b) Total represents the following:
Of two, to own parent - one is out of care.
Of three out of care
one - to own parent
one - employed
one - in another institution

TABLE IX

KINDS OF EMPLOYMENT THE TWENTY-
TWO ADOLESCENTS HAD AFTER
LEAVING THE CHILDREN'S
CENTER

Kinds of Jobs	Number of Children On Various Jobs
Hospitals	5
Work-wage	5
Farm	3
Factory	6
Laundry	1
Sales	2
Hotel	1
Theater	2
Department Store	2
Restaurant	2
Religious Order	1
Miscellaneous	3 (a)
Total	33

(a) Odd jobs - recording is vague as to type of work.

facturing state, it was not strange to find six of the group in jewelry plants. In these plants jobs fluctuate according to the seasonal business of jewelry.

Table X on page 64 shows the various community services that were made use of for the help of the individual adolescent in addition to case work, recreation groups at the Center, and psychometric testing which is routine for all children in the care of the Children's Division.

The writer did not list the Society for the Prevention of Cruelty to Children and the R. I. Department of Public Assistance whose services were given for protection and financial assistance. However, the writer did list the use of a Department of Public Welfare of California, since they agreed to follow up the adjustment of one boy who went to live there with his father.

Table X indicates that the Children's Center recommendations of a few years ago have been carried out with regard to psychiatric service at the Center.

The Junior Placement Division of the School Department of Providence is helpful to children over age sixteen who are looking for jobs.

The United States Employment Service was also helpful to the group. The writer himself has found them to be ready always to help out children from the Children's Center.

It would seem that there might have been more group work

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TABLE X

SERVICES TO THE GROUP IN ADDITION TO
CASEWORK AND PSYCHOMETRIC TESTING (a)

Services	Prior to Children's Center	At Children's Center	After Leaving Children's Center
Psychiatric Consultation	2	12(b)	2
Family Service Society	-	-	1
Child Guidance Clinic	3	-	-
Psychiatric Hospital	-	-	2
U.S. Employment Service	-	-	5
Jr. Placement of School Department	-	-	4
Probation Dept. of Juvenile Court	1	-	1
Other Hospitals	-	-	3
Group Work Agencies	-	4	1
Public Assistance (other states)	-	-	1

(a) Psychometric Testing is routine for all children under the care of the Children's Division.

(b) One girl refused this service in addition to this number.

participation in community agencies while the children were at the Center. The writer found four who did utilize such service. They were all girls. Yet the lack of recording in some cases may be responsible for this small number since the boys and girls both attended scout groups and boys' and girls' clubs in the city of Providence.

CHAPTER VI

SUMMARY AND CONCLUSIONS

It was the writer's purpose to study the community adjustments of twenty-two adolescents following discharge from the Children's Center. In doing so the writer studied their case records to understand the factors previous to commitment to the Children's Division and previous to admittance to the Children's Center. The writer also studied their adjustments at the Center. Casework with the children and their families and the use of other services for helping the adolescents were under consideration. A further purpose was to consider the preparation the institution is able to give an adolescent for community living.

The group of twenty-two adolescents studied was composed of thirteen boys and nine girls. Mainly they came from Catholic families; but seven came from Protestant families. In one case the religion was mixed. The parental situations of the families of this group (as shown in Table I) at the time of the study, were mostly negative for the best interests of the adolescents. In only two cases were parents able to care for their children in their own homes following discharge from the Center. About half of the group were in their adolescence at the time of commitment to the Children's Division. The ages ranged from birth to fifteen years at commitment.

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(See Table II.)

As shown in Tables III and IV, this group may be considered dull normal intelligence and retarded in school.

The four adolescents who spent lengthy institutional life prior to admittance to the Center had difficulty in adjusting to community life. Three are now in other institutions, and one is still in the community though unemployed. The longest time spent in the Center was nearly six years which was not continuous. Between returns to the Center there were foster home placements. The mean number of months spent in the Center was 21.9. (See Table V.)

Fifteen adolescents lived in foster homes. The range was from two months to fifteen and a half years. Two children had nine foster home changes. Two had five and six changes; but eleven had from one to three changes. One boy with fifteen years in foster homes, having nine different changes, is continuing in the community. (See case 3.) One girl with over ten years in foster homes, having nine changes also, was unable to remain in the community and is now in a training school. It would seem that this group showed many problems. Only about a third of the group were placed in the normal category. (See Table VI.) According to Table X twelve adolescents received the services of the psychiatrist while they were in the Center.

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With regard to casework the writer found little intensive work done. Previous to admittance to the Center casework was with foster parents, parents and relatives. At the Center the child seemed to get the attention of the institution staff with the case worker being in the background. Yet there too the bulk of the casework was done with parents and relatives, in foster home evaluations, and job finding. After discharge from the Center the adolescents were supported by the case worker. Environmental manipulation was a frequent device for helping the adolescent adjust in jobs and boarding homes. Assistance in budgeting was useful. Miss Laden concludes that the budget may be used "as a tool in helping the working adolescent come to terms with himself in his struggle toward maturity."¹

It would seem that the Children's Center program is adequate to prepare children for community life. Yet it may be

¹ Alice Laden, "The Use of the Budget for Earned Income in Helping the Adolescent in Placement," Child Welfare League of America Bulletin, 25:6, September, 1946.

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After discharge from the Center the adolescents were supported by the case worker. Environmental manipulation was a frequent device for helping the adolescent adjust in jobs and boarding homes. Assistance in budgeting was useful. Miss Loden concludes that the budget may be used "as a tool in helping the working adolescent come to terms with himself in his struggle toward maturity."

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1 Alice Loden, "The Use of the Budget for Earned Income in Helping the Adolescent in Placement," Child Welfare Bureau of America Bulletin, 25:6, September, 1946.

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Resources for vocational training may be a recommendation, especially for boys. It seems that girls have a sound resource in their work as mothers' helpers. Boys need a skill. Their low intelligence and lack of training seemed to have kept them doing menial jobs as shown in the cases studied.

The writer feels that casework with adolescents may consider the following: (1) A balance may be reached on the uses of authority, support, and freedom. (2) There should be a working through of the parental relationships so that the adolescent knows his rightful place with regard to his parents. (3) Understanding that the adolescent seeks relationships outside the family environment or foster family environment is important. (4) Despite parental rejection and birth out of wedlock, there is an uncontrollable drive to belong and feel wanted in their own families.

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The writer feels that preparation for community life is difficult in normal families. Work with deprived children is naturally more difficult. The writer feels that the Children's Center is able to prepare the child as it is able to work with parents, relatives, the child, and fully evaluate the influences of other institutions and environments upon the particular child.

If the adolescent is going to be helped to adjust in the community, the case worker will have to interpret his needs to employers, parents, relatives, and foster parents wherever he goes. Interpretation to the community also seems indicated so that emotionally handicapped children are given the democratic advantages of the right to a job, the right to be respected as persons, and the right to happiness.

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SCHEDULE

1. Name, age, religion, IQ.
2. Commitment, kind and date.
3. Length of time in Children's Center.
4. Was child returned to the Children's Center? Why?
5. Length of time in community after leaving Center about age sixteen. (Time measured to January 30, 1949)
6. Adjustment previous to commitment and admittance to Children's Center.
 - a. Family
 - b. Foster home adjustments
 - c. Other institutional adjustments
 - d. Health
 - e. Personality behavior
 - f. Education
 - g. Religion
7. Adjustment at Children's Center.
 - a. Family
 - b. Group Behavior
 - c. Personality and personal habits
 - d. Health
 - e. Education
 - f. Recreation
 - g. Work or duties
 - h. Relations with adult staff
 - i. Relations with the opposite sex and own sex
8. Adjustment in the community after leaving the Children's Center.
 - a. Family and other adults
 - b. Work and budget
 - c. Personality and personal habits
 - d. Friends - own sex and opposite sex
 - e. Education

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 - b. Friends - own sex and opposite sex
 - c. Personality and personal habits
 - d. Work and budget
 - e. Family and other adults

SCHEDULE

(Continued)

- f. Religion
- g. Did child go to another institution?

9. Casework Services for the Child.

- a. Plans of the child
- b. Family plans
- c. Casework at the Children's Center
- d. Casework after leaving the Center
- e. Severity of the problems

10. Other services.

- a. Prior to admittance to the Center
- b. At the Center
- c. In the community after leaving the Center

11. The child's ability to see his problem and his ability to do something about it.

SCHEDULE

(Continued)

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